



STATE OF UTAH
NATURAL RESOURCES
Oil, Gas & Mining

Norman H. Bangerter, Governor
Dee C. Hansen, Executive Director
Dianne R. Nielson, Ph.D., Division Director

355 W. North Temple • 3 Triad Center • Suite 350 • Salt Lake City, UT 84180-1203 • 801-538-5340

February 2, 1988

CERTIFIED RETURN RECEIPT REQUESTED
(P 001 719 358)

Mr. Melvin A. Coonrod
Permitting & Compliance
Co-Op Mining Company
P. O. Box 1245
Huntington, Utah 84528

Dear Mr. Coonrod:

Re: Bear Canyon Lease Addition, Co-Op Mining Company, Bear
Canyon Mine, ACT/015/025, Folder #2, Emery County, Utah

The Division has recently received two packages from Co-Op Mining Company. The first, a letter from Mr. Carl Kingston with an Addendum to a coal mining lease, and secondly, a package received February 1, 1988, with no cover letter, but a notice on the front describing a fee coal lease addition to the permit area at Bear Canyon.

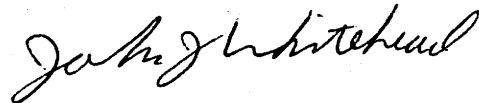
In a brief review of the material submitted, the format appears to be unacceptable in that there are many pages with no page numbers and no directions as to where this fits into the existing Bear Canyon Mine Plan. This is confusing, not only to the Division in our review process, but to the public in the public review/notification process. Therefore, the Division will hold this submittal in abeyance until we receive the following items from Co-Op Mining Company. This is consistent with the Division's Nov. 16, 1987 letter to all coal operators.

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M. A. Coonrod
ACT/015/025
February 2, 1988

1. A signed transmittal letter defining what action Co-Op is requesting from the Division on the items submitted.
2. Specific instructions for insertion of this material into the Bear Canyon Mine Plan.
3. Unique page numbers for each page submitted.
4. Formal permit fee of \$5.00 filed with the Division.

Please feel free to contact me if you should have questions about this matter.

Sincerely,



John J. Whitehead
Permit Supervisor/
Reclamation Hydrologist

djh

cc: E. Kingston
L. Braxton
W. Hedberg

0800R/48

P 001 719 358

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982
* U.S.G.P.O. 1984-446-014

Sent to <u>Melvin A. Coonrod</u>	
<u>Co-op Mining Co.</u>	
Street and No. <u>P.O. Box</u>	
P.O., State and ZIP Code <u>Huntington Ut</u>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

ACT/015/025 *AK*

PS Form 3811, Dec. 1980

● SENDER: Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.

(CONSULT POSTMASTER FOR FEES)

- The following service is requested (check one).
 - ☒ Show to whom and date delivered \$
 - ☐ Show to whom, date, and address of delivery.. \$
- ☐ RESTRICTED DELIVERY
(The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL \$

3. ARTICLE ADDRESSED TO: Mr. Melvin Coonrod
Co-op Mining Company
P.O. Box
Huntington UT

4. TYPE OF SERVICE:
- | | |
|---|----------------------------------|
| <input type="checkbox"/> REGISTERED | <input type="checkbox"/> INSURED |
| <input checked="" type="checkbox"/> CERTIFIED | <input type="checkbox"/> COD |
| <input type="checkbox"/> EXPRESS MAIL | |

ARTICLE NUMBER

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☒ Authorized agent

5. DATE OF DELIVERY

POSTMARK

6. ADDRESSEE'S ADDRESS (Only if requested)

FEB 8 - 1988

7. UNABLE TO DELIVER BECAUSE:

7a. EMPLOYEE'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

ACT/015/025 *AK*